

Sentencing Guidelines Cover Sheet Complete this form ONLY for applicable felonies sentenced on or after July 1, 2008.

OFFENDER —		
First:		Middle:
Last:		Suffix:
Date of Birth: / _	/ Social Security N	Number:
	Day Year	PSI Number:
COURT —		
Judicial Circuit :	City/County:	FIPS Code:
Judge's Name:		Office Use Only
Preparer Name:	Preparer Tit	tle:
Prosecuting Commonwealth's A	Attorney:	Defense Attorney:
CONVICTIONS —		
Offense	Counts VCC	Offense Date
Primary Offense:		Month Day Year
Additional Offenses:		
Primary Offense Code Section	: §	Docket Number:
METHOD OF ADJUDI	CATION —	
☐ Jury Trial → Sentence Se	et by Jury: Life Sentence Years	Months Days
☐ Bench Trial ☐ Gu	ilty Plea	endere
SENTENCING GUIDE	LINES RECOMMENDATIONS	
Section B	Section C	
☐ Probation / No Incarceration	n Life Sentence	
☐ Incarceration 1 Day to 3 M	onths Incarceration (Enter	Midpoint and Range Below)
☐ Incarceration 1 Day to 6 M		
☐ Incarceration 3 to 6 Months		Years Months
Probation / No Incarceration Incarceration to 6 Months	on or Sentence Range	то
Mandatory Minimum	Recommendation	Years Months Years Months Adjusted for Mandatory Minimum
NONVIOLENT RISK AS	SESSMENT Section D of Drug, Fraud	d, and Larceny Worksheets
Recommended for Alte	ernative Punishment or Alternative Punishment	Not Applicable



SENTENCE —	Years Months Days	
Total Time Imposed Before Suspension ☐ Life Sentence +	Today Horizon Buyer	
Total Time to Serve (effective)	Sente Time S	
Post Release Term §18.2 -10		
Post Release Supervision Period §19.2 - 295.2 (A)		
Probation Period (Supervised) §19.2 - 303 ☐ Indefinite		
Check all that apply		
Incarceration Sentence to Run Concurrently With Another Se	•	
_	commendation Accepted	
Restitution \$,,,	☐ Fine \$, ,	
Other Sentencing Programs (Check all that apply)		
	Office Use Only or name of program e Use Only	
SENTENCING DATE / /	Judge's Signature	
ATTACH COURT ORDER AND MAIL Pursuant to After sentencing, send to:	§19.2-298.01(E))